

DEPARTMENT OF THE ARMY
HEADQUARTERS, WALTER REED ARMY MEDICAL CENTER
6900 Georgia Avenue, N.W.
Washington, DC 20307-5001

WRAMC Regulation
No. 40-9

3 June 2002

Medical Services
BLOOD DONOR PROGRAM

1. History

This policy is a revision of the previous policy. The changes have not been highlighted.

2. Purpose

To describe policies and procedures concerning the operation and management of a volunteer blood donor program at Walter Reed Army Medical Center (WRAMC).

3. Applicability

This regulation applies to all WRAMC administrative and clinical activities, and to all outlying clinics and tenant activities assigned to WRAMC.

4. References

- a. AR 40-3, Medical, Dental and Veterinary Care, 28 January 2002.
- b. AR 40-66, Medical Records and Health Care Documentation, 3 May 1999.
- c. AR 600-8-10, Leave and Passes, 31 July 1994.
- d. WRAMC Form 1843, (Blood Donor Excused Absence Authorization), 1 August 1987.

5. Responsibilities

- a. Installation Commander will:

- (1) Formally establish and operate an installation blood program at the installation staff level to coordinate the provision of volunteer donors from their own unit, subordinate units, tenant units and activities.

- (2) Develop, maintain and fund programs of donor motivation, education, incentive, and recognition.

- b. Hospital Commander, Tenant Commanders, Outlying Clinic Commanders/Officers in Charge, heads of directorates/departments, separate services, and special staff identified at appendix B, are requested to:

- (1) Appoint a Blood Donor Recruitment Officer for their section or activity, and furnish the name and duty telephone number to the Blood Donor Center Officer.

- (2) Promptly notify the Blood Donor Center Officer upon re- appointment of a new Blood Donor Recruitment Officer.

*This regulation supersedes WRAMC Regulation 40-9, 15 December 1987.

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(3) Support the WRAMC Blood Donor Program by making time available to employees to donate during normal duty hours and ensuring that blood donor incentives are provided.

c. Blood Donor Center Officer will:

(1) Be the designated WRAMC Blood Donor Procurement Officer and will establish blood donor recruitment goals for WRAMC.

(2) Operate and maintain the Blood Donor Center in accordance with (IAW) appropriate licensure and accrediting agencies' requirements.

(3) Collect, process, and store blood and blood products.

d. Blood Donor Recruitment Officer will:

(1) Solicit and encourage voluntary blood donations from his/her command, directorate/department, service or staff.

(2) Coordinate the scheduling of blood donor drives with the Blood Donor Center Officer.

(3) Assist in establishing blood donor goals for their command, directorate/department, service or staff.

e. Public Affairs Officer will be responsible for providing maximum media coverage for the WRAMC Blood Donor Program, and will assist the Blood Donor Center Officer in developing marketing strategies in order to maximize the donor potential at WRAMC and outlying areas.

6. Policies

a. The Army is charged with the responsibility of providing from its own resources, the blood and blood components required to treat patients receiving care in Army medical treatment facilities.

b. In peacetime, blood collections are restricted to military installations from military personnel, their family members, and civilian Federal employees.

c. The WRAMC Blood Donor Program is established to meet the Commander's responsibility for providing volunteer donors at the frequency and in sufficient quantity to enable WRAMC to maintain a working inventory of blood in the appropriate groups and types for usual treatment needs and additionally for contingency and emergency needs.

d. Tenant Commanders, heads of directorates/departments, separate services and special staff will encourage blood donations from personnel within their organization.

e. Personnel who voluntarily donate blood will be given administrative absence from their duty section in order to donate blood. Some interruption to working and training schedules is inevitable, as donations should normally be made during duty hours.

f. As operational necessity permits, military blood donors are authorized a three-day pass, and civilian blood donors are authorized up to four hours of excused absence at the discretion of their supervisor. Duty limitations are also prescribed to the blood donor for the 12-hour period following donations. (See appendix A).

g. The Blood Donor Center is authorized to procure from appropriated funds, small tangible donor gifts to be awarded to blood donors as they reach various blood donation milestones.

h. Directed blood donations are not accepted by WRAMC Blood Donor Center. The WRAMC Volunteer Blood Donor Program strives to provide equal access to the safest possible product for all recipients and supports the present concept of a voluntary blood donor system. The ONLY exceptions to this policy are for medical necessity of the patient or for parents donating for their children.

i. Blood donors will not be provided in support of civilian blood donor programs unless WRAMC blood needs have been met. This constraint will ensure that such a diversion of resources will not adversely impact upon the mission of the WRAMC Blood Donor Program.

j. The WRAMC Autologous Blood Donor Program is available to those patients who have their blood drawn by the WRAMC Blood Donor Center. Exceptions may be made only when specific arrangements are made in advance with the WRAMC Blood Donor Center for collection at an alternate location.

7. Routine Blood Donations

a. The WRAMC Blood Donor Center is located in Room 4821, 4th floor, Building 2, Walter Reed Army Medical Center.

b. Volunteer blood donations are routinely taken every Tuesday through Thursday between 0900 and 1400. Appointments are strongly encouraged for all donations. The telephone numbers of the Blood Donor Center are 202-782-4156/3113.

c. Following a blood donation, excused absence is authorized as set forth in paragraph 6.f.

d. Results of quarterly in-house blood donor competitions when active will be published on the computer information systems

e. WRAMC Certificates of Appreciation will be awarded to all gallon donors (eight units or equivalent of blood) and multi-gallon donors.

f. A Traveling Quarterly Plaque will be awarded to the command directorate/department, separate service or special staff with the highest percentage of participation based on assigned strength.

g. Routine blood drives may be conducted as needed.

8. Autologous (Self) Blood Donations

a. Through the WRAMC Autologous Blood Donor Program, patients in certain categories may pre-deposit blood to meet future transfusion requirements. Patients scheduled for elective surgery where there is a high probability of blood use and/or patients with multiple blood group antibodies or rare blood groups are encouraged to enter into the Autologous Blood Donor Program.

b. All physicians desiring to enter a patient into the Autologous Blood Donor Program must obtain an Autologous Blood Donor Packet from the Blood Bank and complete the Physician's Order Form and Statement of Consent. The Physician's Order Form as a minimum must state:

(1) Patient's full name.

(2) Social Security Number and Family Member Prefix.

(3) Surgical procedure.

(4) Date of Surgery.

(5) Total number of units to be drawn and pre-deposited.

(6) Type of products to be drawn and pre-deposited.

(7) Information relevant to underlying medical conditions, which may affect the patient's ability to tolerate repeated phlebotomies.

(8) Responsible physician's name and reliable contact information in the event that unexpected information, concerning the donor or blood product needs to be relayed.

c. Although pre-deposit phlebotomy may be performed only at the written request of the patient's physician, the Medical Director, Blood Bank Section is responsible for determining prior to each donation, the suitability of drawing blood from the patient.

d. Medical risks of pre-deposit phlebotomy are, in most cases, the same as those for regular blood donations and the patient must be informed in the usual way of possible adverse reactions to donation. Patients who are not in general good health may be at increased risk. If the donor-patient is a minor, a parent or guardian must accompany the patient and give written consent.

e. Candidates for autologous donation need not meet all criteria for homologous donations. However, donors units must be labeled 'For Autologous Use Only' and must be segregated while in storage and discarded if not used by the patient.

f. Patients with a known history of hepatitis, or a positive laboratory test for Hepatitis B Surface Antigen (HBsAg) Hepatitis C (HCV), or Human Immunodeficiency Virus (HIV) will not be accepted into an autologous blood donor program. Bacteremia is an absolute contraindication to autologous donation.

g. The referring physician/surgeon is responsible for:

(1) Notifying the Blood Bank of any changes to the scheduled surgery.

(2) Notifying the anesthesiologist of predeposited autologous units.

(3) Determining the earliest date when stored autologous units can be discarded (unless preempted by the expiration date of the blood product).

h. Autologous blood donations are accepted routinely every Tuesday through Thursday in the Blood Donor Center between the hours of 0900 and 1400. Patients must call the Blood Donor Center prior to their first donation for an appointment at 202-782-4156/3113.

i. Autologous blood will not be available-for issue for at least 72 hours following donation.

j. Selected patients should be provided oral iron supplementation.

9. Apheresis Donations

a. Platelet concentrates are also collected through a process called apheresis, whereby platelets are harvested from a donor using an instrument, which separates platelets from whole blood and returns the red cells and plasma to the donor.

b. The Apheresis Donor Center is co-located with the WRAMC Blood Donor Center (see paragraph 7a). Hours of operation are from 0800 to 1400, Monday through Friday.

c. Volunteer donors are accepted by appointment only as the procedure usually takes up to two hours. For an appointment, call (202) 576-3372/4156.

d. Donors of platelets by apheresis must meet the same criteria applicable to donors of whole blood; however, donors of platelets by apheresis may give as often as every 48 hours, not to exceed 24 times per year.

e. Donors who have taken aspirin or aspirin-containing medications within three days of donation will be deferred at least 24 hours or up to three days have passed since last ingestion of product based on the type of product.

10. Directed Donations

a. Directed donations, requesting blood from friends and relations, are not performed at Walter Reed Army Medical Center. The only exceptions (to be approved by the Medical Director) will be:

(1) Donations of parents donating for their children.

(2) Donations in support of medical disorders (deemed by the Medical Director or his representative) that are best treated with blood from a specific donor.

b. When performed, directed donations will require a minimum of 5 days to process and must be from ABO/Rh compatible donors who meet all allogeneic blood donor criteria.

APPENDIX A

BLOOD DONOR EXCUSED ABSENCE AUTHORIZATION

_____ voluntarily donated a unit of blood on
(name)

_____ at _____ to the Blood Donor Center at Walter Reed Army Medical
(date)

Center, Washington, DC. In accordance with WRAMC Regulation 40-9, military blood donors are authorized a three-day pass, and civilian blood donors are authorized up to four hours of excused absence at the discretion of their supervisor. Duty limitations are also prescribed to the blood donor for the 12-hour period following donations. THANK YOU!

(Signature) _____
Blood Donor Center Staff Member

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APPENDIX B

WRAMC BLOOD PROGRAM ACTIVITY BLOOD SCHEDULE

ARMED FORCES INSTITUTE OF PATHOLOGY
CENTER JUDGE ADVOCATE
DEPARTMENT OF ALLERGY AND IMMUNOLOGY
DEPARTMENT OF CLINICAL INVESTIGATION
DEPARTMENT OF HEALTH PLAN MANAGEMENT
DEPARTMENT OF MEDICAL ADMINISTRATION AND OPERATIONS
DEPARTMENT OF MEDICINE
DEPARTMENT OF NURSING
DEPARTMENT OF OBSTETRICS/GYNECOLOGY
DEPARTMENT OF ORTHOPEDIC SURGERY AND REHABILITATION
DEPARTMENT OF PASTORAL CARE
DEPARTMENT OF PATHOLOGY AND AREA LABORATORY SERVICES
DEPARTMENT OF PEDIATRICS
DEPARTMENT OF PHARMACY
DEPARTMENT OF PREVENTIVE MEDICINE
DEPARTMENT OF PSYCHOLOGY
DEPARTMENT OF RADIOLOGY
DEPARTMENT OF SOCIAL WORK
DEPARTMENT OF SURGERY
DIRECTORATE OF LOGISTICS
DIRECTORATE OF NUTRITION CARE
DIRECTORATE OF PATIENT ADMINISTRATION
DIRECTORATE OF PERSONNEL AND COMMUNITY ACTIVITIES
DIRECTORATE OF PUBLIC WORKS
DIRECTORATE OF RESOURCES MANAGEMENT
DIRECTORATE OF SAFETY, HEALTH AND ENVIRONMENT
INSPECTOR GENERAL
MEDICAL CENTER BRIGADE
DEPARTMENT OF NEUROLOGY
OFFICE OF THE COMMANDER
PROVOST MARSHAL OFFICE
PUBLIC AFFAIRS OFFICE
STAFF OF NORTH ATLANTIC REGIONAL MEDICAL COMMAND
US ARMY AREA DENTAL LABORATORY
US ARMY DENTAL ACTIVITY (DENTAC)
US ARMY INFORMATION SYSTEM COMMAND
US ARMY INSTITUTE OF DENTAL RESEARCH
US ARMY PHYSICAL DISABILITY AGENCY
VETERINARY SERVICES
WALTER REED ARMY INSTITUTE OF RESEARCH

APPENDIX C

COMMON REASONS FOR BLOOD DONOR DEFERRAL

A person should not donate blood if any of the following apply:

1. Today--Not feeling well (e.g., cold, flu, etc.) or open wound / unhealed surgical site.
2. Currently have a Medical Condition that has not yet been cleared for blood donation by Blood Bank physician (e.g., cancer, chest pain, heart disease, high blood pressure, rheumatoid arthritis, seizures, etc.). Note—Medical reason for all medications taken in the last 30 days will be screened.
2. Dental treatment waiting periods:
 - a. 24 Hours: After Cleanings or Fillings.
 - b. 3 days: After Oral Surgery of Root Canals.
4. Last 72 hours—Aspirin--Platelet Donors Deferred. (OK for Whole Blood donation.)
5. Immunization / Vaccine waiting periods:
 - a. 2 weeks: Oral polio, Yellow fever, Smallpox, Mumps or Measles (Rubeola).
 - b. 4 weeks: Measles, Mumps, and Rubella (MMR), Rubella or Chickenpox vaccines.
6. Recent blood donor. A person should not donate
 - a. Whole Blood (WB) if less than 8 wks since WB donation or 2 days since platelet donation.
 - b. Platelets if less than 2 days since WB or platelet donation.
7. Last 2 Weeks—Tick Bite—If Lyme Disease, wait 12 months after treatment and symptoms are resolved.
8. Last 6 Weeks—Pregnancy.
9. Last 2 Months—Animal Bite—Must be healed at time of donation. Wait 12 months if animal lacks current rabies vaccine or is unknown or wild animal.
10. Travel at Risk for variant Creutzfeldt-Jakob Disease (vCJD; mad cow disease):
 - a. Travel to United Kingdom (e.g. England) for 3 months or more from 1980 –1996.
 - b. Travel to Other European Countries for 6 months or more from 1980 – 1996.
 - c. Travel to Either UK or European Countries for 5 years or more from 1997-now.
11. Last 12 months—Travel to a malarial endemic area --or-- Last 2 Years—travel to North of Seoul in Korea (e.g., Demilitarized Zone (DMZ), Camp RedCloud/Uijongbu, Camp Casey/Tongduchon (TDC).
12. Last 12 months—Tattoo, branding, human bite.
13. At Any Time—History of Viral Hepatitis after 11th birthday, or test positive.

NOTE: This is only a partial list. Before each donation a confidential interview takes place. Donors should be well hydrated and should have eaten in the last 4 hours. For more other specific eligibility questions, contact the WRAMC Blood Donor Center at (202) 782-4156.

The proponent agency for this publication is the Department of Pathology and Area Laboratory Services. Users are invited to send suggestions and comments on DA Form 2028 (Recommended Changes to Publications and Blank Forms) to the Commander, Walter Reed Army Medical Center, ATTN: MCHL-U, 6900 Georgia Avenue, N.W., Washington, DC 20307-5001.

FOR THE COMMANDER:

OFFICIAL:

JAMES R. GREENWOOD
COL, MS
Deputy Commander for
Administration

A handwritten signature in black ink, appearing to read 'ERIK J. GLOVER', written over the printed name.

ERIK J. GLOVER
MAJ, MS
Executive Officer

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